## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE

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indicated unless corrected below maintenance fee notifications.	v or directed otherw	ise in Block I, by (a					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
140 7590							
LADAS & PARRY LLP 26 WEST 61ST STREET NEW YORK, NY 10023				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Serdice with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				John Ri	chards	1/1/	(Depositor's name)
							(Signature)
				Februar	y N.	200/3	(Date)
APPLICATION NO. FILING DATE		FIRST NAMED INVE		OR	ATTOR	RNEY DOCKET NO.	CONFIRMATION NO.
10/535.751 12/05/2005		ŗ	aul Richard Uyttenboo	gaart		U015777-6	9179
TITLE OF INVENTION: BELT	AND TREAD DRU	M					
APPLN, TYPE SM/	ALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID I	SSUE FEE	TOTAL FEE(S) DUE	. DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	03/18/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
KNABLE, GEOFFREY L		1791	156-414000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RE PLEASE NOTE: Unless an recordation as set forth in 37  (A) NAME OF ASSIGNEE  VMI EPE HOLLAND B.  Recorded: Please check the appropriate assi	assignee is identified CFR 3.11. Completion  V.  December 21	below, no assignee on of this form is NO	data will appear on the Ta substitute for filing (B) RESIDENCE: (C RK EPE, THI el/Frame: 01	e patent. If an as an assignment. ITY and STATE C E NETHERLA 7382/0024	R COUNTE	RY)	
4a. The following fee(s) are subn	<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-0425 (enclose an extra copy of this form).</li> </ul>						
5. Change in Entity Status (fro. a. Applicant claims SMAI	LL ENTITY status. S	ee 37 CFR 1.27.	, , .			TTY status. See 37 CI	
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Authorized Signature			Date February 4, 2009				
Typed or printed name	Registration No. 31053						
This collection of information is an application. Confidentiality is submitting the completed applic this form and/or suggestions for Box 1450, Alexandria, Virginia Alexandria, Virginia 22313-1450 Under the Paperwork Reduction	22313-1430. DO NC ).	I SEND FEES OK	COMPLETED FORM	5 TO THIS ADDI	ESS. SEIND	TO: Commissioner	101 Tatelles, 1.0. Dox 1450.